Weight loss surgery

Your first step is here.





Why choose weight loss surgery?

If you feel like you have tried everything and haven't been successful, please know that weight loss isn't out of reach. You deserve to be healthier, and we can help you get there.

Weight loss surgery does not just treat obesity. It also treats metabolic diseases and many associated comorbid conditions, such as diabetes, sleep apnea and hypertension. It can also reduce or improve risks or symptoms for other disease states such as polycystic ovary syndrome, arthritis or even cancer.

In one study, patients who underwent weight loss surgery were 30% less likely to get cancer than those who qualified for weight loss surgery and did not receive it. Additionally, patients who developed cancer after undergoing weight loss surgery had a 50% better survival rate.¹

Your lifelong partners in health

Weight loss surgery is proven to be an effective way to achieve successful, long-term weight loss. Yet many people don't pursue weight loss surgery because they believe it's "the easy way out." This is simply not true.

Weight loss surgery is a tool. Using that tool is up to you. Lifelong follow-up care with your surgeon, attending support groups and staying connected to your care team will be essential to your success.

That's why at many of our HCA Florida Healthcare weight loss surgery programs, we offer comprehensive services, including dietary and mental health education and support, before and after surgery.



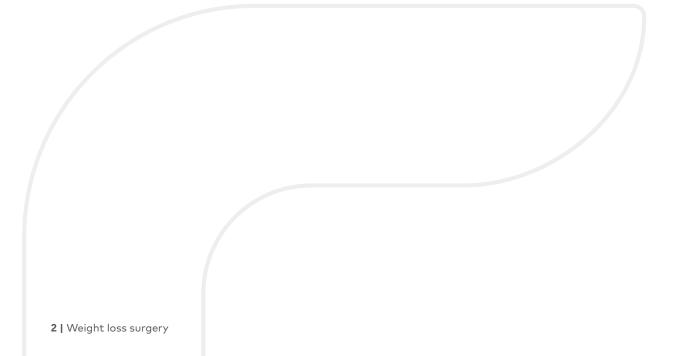
To find out more about our weight loss surgery programs or to schedule a consultation with a surgeon, select the weight loss surgery specialty on HCAFloridaHealthcare.com.

Choosing the right procedure for you

With a wide range of weight loss surgical treatment options available, there are many factors to consider when deciding which procedure is right for you, including:

- Desired weight loss
- Medical history
- Risk for complications
- Eating habits
- Lifestyle
- Postoperative reversal or revision
- Postoperative follow-up care

Make sure you discuss these and other factors with your doctor. Your surgeon will assist you in deciding which surgery is best for you. However, unless it is not safe, the type of procedure you receive is ultimately up to you.



Weight loss surgical treatment options

For those who qualify, there are several surgical options available. Our skilled surgeons use minimally invasive techniques such as endoscopy, laparoscopy and robotic-assisted surgery, which allow fast recovery times and minimal scarring.

Note: Not all weight loss surgeons perform every procedure.

Gastric sleeve or sleeve gastrectomy

The most popular option in weight loss surgery is the gastric sleeve, or sleeve gastrectomy. In this procedure, a fairly large portion of the stomach is removed, leaving only a banana-sized, sleeve-shaped portion. Because the size of your stomach is smaller, the amount of food you can eat and your appetite are reduced.

You can expect to lose about 60% of excess weight with this procedure.

Gastric bypass or Roux-en-Y

Gastric bypass surgery involves making the stomach smaller and bypassing part of the small intestine. In this procedure, the stomach is divided into two portions. The top portion, which is about the size of an egg, becomes your new stomach. The lower portion is bypassed and no longer used to digest food. The small intestine is then divided and connected to the newly created top portion, bypassing part of the digestive tract, resulting in decreased absorption of calories, vitamins and minerals. (Note: Due to the decrease in the absorption of essential nutrients, lifelong vitamin and mineral supplementation is required.)

The "mini" bypass or one-anastomosis gastric bypass is a modification of the original gastric bypass.

Those who undergo this procedure can expect to lose as much as 70% of their excess weight.

Duodenal switch

Duodenal switch surgery combines a gastrectomy, the removal of part of the stomach, with an intestinal bypass, which makes the path your food takes through your intestines shorter. This procedure reduces the size of the stomach as well as how much nutrition your small intestine can absorb from food. Typically, this procedure is an option for patients with a very high body mass index (BMI). The single anastomosis duodeno-ileal bypass, or SAD-IS, is a type of duodenal switch procedure that is highly effective for Type 2 diabetes treatment.

Those who undergo duodenal switch procedures typically experience an 80% reduction in their excess weight.

Gastric band

Gastric band procedures involve dividing the stomach into two parts by placing an adjustable silicone band around the top portion of the stomach that can be filled with fluid. This procedure makes you feel full faster because the band regulates the amount of food that passes through your digestive tract.

Those who undergo this procedure can expect to lose up to 50% of their excess weight.

Other procedures

As the field of bariatric surgery evolves, there are other or new procedures that are not listed on this page. If you are interested in a procedure not listed or want to know about other options, consult with your bariatric surgeon.

Determining your eligibility for weight loss surgery

Weight loss surgery is an option for people who have been unsuccessful in losing weight through diet and exercise and for individuals experiencing weight-related health problems.

You may be a good candidate for weight loss surgery if you meet one of the following criteria:

- Your BMI is between 35 and 39.9, and you have a diagnosed obesity-related health condition, such as diabetes, high blood pressure or sleep apnea.
- Your BMI is greater than 40.
- You are at least 100 pounds overweight.

Insurance requirements for weight loss surgery

If you are qualified as a candidate for weight loss surgery, some key next steps include insurance verification and consultation. We recommend that you call your insurance company to verify you have coverage for surgery and obtain the specific requirements to qualify. Typically, insurance will require various qualifications such as:

- BMI
- Psychological evaluation
- Letter of support
- Nutritional evaluation
- Weight management

Your surgeon's office or facility will also verify your insurance requirements and navigate you through the preoperative process. If you do not have coverage, other payment options are often accepted.

Note: It typically takes two to three months to complete the preoperative program, depending on your insurance company and physician's requirements.

Next steps

On the next page there is a checklist of the requirements that your insurance company and surgeon typically need. Use the following to determine what steps you should complete prior to surgery.

Getting started checklist

- $\hfill\square$ View seminar.
- □ Verify coverage with insurance company.
- Complete online forms.

After these steps are completed, we will contact you to verify that you qualify and discuss preoperative steps. Specific requirements may be provided before or during your consultation.



Step	Required	Date and time of appointment (if applicable)	Appointment location or name	Completed	Notes
Consultation					
Psychological evaluation					
Dietary/nutritional evaluation					
Letter of support					
Medical record release form					
Medical records					
Labs					
Esophagogastroduodenoscopy (EGD)					
Upper gastrointestinal series (UGI)					
Support group attendance (number of visits)					
Medical weight management (Three, six or <u> </u>					
Sleep study					
Cardiac clearance					
Endocrinology evaluation					
Pulmonary clearance					
Preoperative visit					
Preoperative education class					
Other class:					
Other class:					
Other class:					
Nicotine testing					
Other:					
Other:					
Other:					

Preparing for weight loss surgery

After weight loss surgery, your diet and lifestyle will be different from what they previously were. Ideally, you will begin these changes before your surgery to give you a head start on leading a healthier life.

We recommend developing the following healthy habits to prepare you for life after weight loss surgery:

- Begin limiting carbohydrates and removing liquid calories from your diet and environment.
- \Box Get in the habit of reading food labels.
- Begin meal planning.
- □ Log daily food intake. (There are several apps that can help you.)
- □ Purchase and use smaller plates and utensils to decrease your portion size.
- □ Practice chewing foods slowly (up to 30 times) prior to swallowing.
- □ Include a lean protein source with every meal.
- Try various protein supplements if your surgeon requires use after surgery.
 (However, do not buy in bulk as your tastes may change after surgery.)
- \Box Sip 64 fluid ounces of water throughout the day for hydration.
- □ Limit going to restaurants, or share a meal if you do eat out.
- Add consistent movement to your day by taking walks or swimming.
- Consider joining a gym or virtual exercise program.
- □ Set reasonable and achievable goals before and after surgery for weight loss.
- □ Surround yourself with positive influences and supportive individuals.
- □ Consider joining a weight loss surgery support group online.
- Begin taking multivitamins daily.
- □ Take a deep breath, and remember that you are doing this to improve your health and longevity. You deserve to be happy and healthy, and you are not alone.

Our weight loss program will help you understand the steps you can take now and what you will need to do after surgery. We will develop diet and exercise plans that apply specifically to you to ensure you can have long-term success in losing weight.

If you need medical advice before or after surgery, you can always reach out to your surgeon or our team with any questions or concerns both before and after your procedure.



To find out more about our weight loss surgery programs or to schedule a consultation with a surgeon, select the weight loss surgery specialty on HCAFloridaHealthcare.com.

¹ Aminian A, Wilson R, Al-Kurd A, et al. Association of Bariatric Surgery With Cancer Risk and Mortality in Adults With Obesity. JAMA. Published online June 03, 2022. © 2022 American Medical Association.